PAGE 1 / 15

Image# 201604159012459047

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than An A	authorized Comm	ittee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If ty		12FE4M5	
Making Investments Ma	ajority Insured PA	C			
ADDRESS (number and street)	9070 Irvine Center Drive	, #150			
Check if different than previously reported. (ACC)	Irvine			CA	92618
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		STATE A	ZIP CODE ▲
C C00564658	3.	IS THIS REPORT	NEW (N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: X April 15 Quarterly Report (Quarterly Report (Non-election Year Only) (MY) Termination Report (TER)	Report Due On: (c) 12-Day PRE-Election Report for the (d) 30-Day POST-Election Report for the	ection on General (on (12C)	Sep 2	in the State of
5. Covering Period 01	01 201			31	2016
I certify that I have examined thi Type or Print Name of Treasurer		t of my knowledge ar	d belief it is true	e, correct and	complete.
Signature of Treasurer Jen St.	ater	[Electronic		ate 04	/ D D / Y Y Y Y Y Y 2016
NOTE: Submission of false, errone Office	ous, or incomplete informa	ation may subject the p	person signing th	is Report to the	
Use					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Making Investments Majority Insured PAC 2016 03 2016 Report Covering the Period: 01 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 7551.11 January 1, 2016 (b) Cash on Hand at 7551.11 Beginning of Reporting Period..... 20208.09 20208.09 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 27759.20 27759.20 6(a) and 6(c) for Column B)..... 22017.38 22017.38 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 5741.82 5741.82 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 2200.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Making	Investments	Majority	/ Insured	PAC

Report Covering the Period: From: 01	01 2016 To	o: 03 31 2016	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Contributions (other than loans) From:			
(a) Individuals/Persons Other			
Than Political Committees	0.00		
(i) Itemized (use Schedule A)	0.00	0.00	
(ii) Hada minad	0.00	0.00	
(ii) Unitemized(iii) TOTAL (add	0.00	0.00	
Lines 11(a)(i) and (ii)▶	0.00	0.00	
Lines Tray(i) and (ii)	4		
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees			
(such as PACs)	6000.58	6000.58	
(d) Total Contributions (add Lines			
11(a)(iii), (b), and (c)) (Carry	0000 50	6000 50	
Totals to Line 33, page 5)	6000.58	6000.58	
. Transfers From Affiliated/Other	44004.54	14094.51	
Party Committees	14094.51	14094.51	
. All Loans Received	0.00	0.00	
=	, , , , , , , , , , , , , , , , , , , ,		
. Loan Repayments Received	0.00	0.00	
. Offsets To Operating Expenditures	7	7 7	
(Refunds, Rebates, etc.)			
(Carry Totals to Line 37, page 5)	113.00	113.00	
. Refunds of Contributions Made			
to Federal Candidates and Other			
Political Committees	0.00	0.00	
Other Federal Receipts		0.00	
(Dividends, Interest, etc.)	0.00	0.00	
(a) Non-Federal Account			
(from Schedule H3)	0.00	0.00	
(ITOTAL OCTICUALE TIO)	0.00	0.00	
(b) Lovin Fundo (from Cohodulo HE)	0.00	0.00	
(b) Levin Funds (from Schedule H5)	7 /7	7 7	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00	
(6) 15141 11411515 (444 15(4) 414 15(5)).	7 7	7 7	
. Total Receipts (add Lines 11(d),			
12, 13, 14, 15, 16, 17, and 18(c))▶	20208.09	20208.09	
. Total Federal Receipts			
(subtract Line 18(c) from Line 19)▶	20208.09	20208.09	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Guisiidai Todi to Dato	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
((b) Other Federal Operating	Cicc		
	Expenditures	317.38	317.38	
((c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	317.38	317.38	
22.	Transfers to Affiliated/Other Party	on.ee		
	Committees	0.00	0.00	
-	Contributions to Federal Candidates/Committees and Other Political Committees	21700.00	21700.00	
	ndependent Expenditures	0.00	0.00	
25. ((use Schedule E)	0.00	0.00	
((2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00	
6 1	oon Rongymente Made	0.00	0.00	
.o. I	_oan Repayments Made		0.00	
	oans Made Refunds of Contributions To:	0.00	0.00	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	man Folitical Committees	3.00		
((b) Political Party Committees	0.00	0.00	
((c) Other Political Committees (such as PACs)	0.00	0.00	
	(505)1 05 17(55)			
(d) Total Contribution Refunds	0.00		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
29. (Other Disbursements	0.00	0.00	
	Federal Election Activity (2 U.S.C. §431(20))			
((a) Allocated Federal Election Activity(from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(ii) III ovinii Chara	0.00	0.00	
((ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00		
,	With Federal Funds	0.00	0.00	
((c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2007	2027.22	
4	20, 27, 20, 20, 21, 20(u), 28 dilu 30(b))	22017.38	22017.38	
	Total Federal Disbursements			
	subtract Line 21(a)(ii) and Line 30(a)(ii)	20047.20	****	
1	rom Line 31)▶	22017.38	22017.38	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page **5**

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	6000.58	6000.58
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6000.58	6000.58
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	317.38	317.38
7. Offsets to Operating Expenditures (from Line 15, page 3)	113.00	113.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	204.38	204.38

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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 15 (check only one) 11a 11b X 11c 12 13 14 15 16 17
	and Statements may not be sold or used by any ng the name and address of any political commit	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Making Investments Majorit	y Insured PAC	
Full Name (Last, First, Middle Initial) A. BNSF RailPAC		Date of Receipt
Mailing Address PO Box 961039		03 25 2016
City	State Zip Code	Transaction ID : INCA174
Fort Worth	TX 76161	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.58
Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.58	
Full Name (Last, First, Middle Initial) B. BNSF RailPAC		Date of Receipt
Mailing Address PO Box 961039		03 25 2016
City	State Zip Code	Transaction ID : INCA175
Fort Worth	TX 76161	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.58	
Full Name (Last, First, Middle Initial) C. PricewaterhouseCoopers PA	 C	Date of Receipt
Mailing Address 600 13th St NW Ste 100	00	03 25 2016
City Washington	State Zip Code DC 20005	Transaction ID : INCA176 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (ontion	nal)	6000.58

TOTAL This Period (last page this line number only).....

6000.58

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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 15 (check only one) 11a 11b 11c X 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Making Investments Majori	ty Insured PAC		
Full Name (Last, First, Middle Initial) A. Mimi Walters Victory Fund	- #450		Date of Receipt
Mailing Address 9070 Irvine Center Driv	e, #150		03 01 _ 2016 _
City Irvine	State CA	Zip Code 92618	Transaction ID : INCA172 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		14094.51
Name of Employer	Occupation		Memo Item Transfer of Funds
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 14094.51]
Full Name (Last, First, Middle Initial) B. Howard Groff			Date of Receipt
Mailing Address 9832 Calvin Ave			01 20 2016
City	State	Zip Code	Transaction ID : IDTA17
Northridge	CA	91324	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		400.00
Name of Employer Northwest Excavating Co Inc	Occupation Contractor		X Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Susan Groff			Date of Receipt
Mailing Address 9832 Calvin Ave			01 20 2016
City Northridge	State CA	Zip Code 91324	Transaction ID : IDTA16
FEC ID number of contributing federal political committee.	C	01024	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation		▼ Memo Item
Northwest Excavating Co Inc	Contractors		
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼	,	5000.00]
SUBTOTAL of Receipts This Page (option	nal)		14094.51

TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 15 (check only one) 11a 11b 11c X 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	Making Investments Majority Ins	sured PA	С	
Α.	Full Name (Last, First, Middle Initial) Eva Stern	Date of Receipt		
	Mailing Address 23700 Malibu Colony Rd			01 21 2016
	City	State	Zip Code	Transaction ID : IDTA15
	Malibu	CA	90265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer	Occupation	l	× Memo Item
	Eva S. Stern	Clinical Soc	cial Worker	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		5000.00	
В.	Full Name (Last, First, Middle Initial) Patrick Dirk			Date of Receipt
	Mailing Address 1808 S Bay Front			02 01 2016
	City	State	Zip Code	Transaction ID : IDTA14
	Balboa Island	CA	92662	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		900.00
	Name of Employer Troy Group	Occupation CEO		Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	
<u> </u>	Full Name (Last, First, Middle Initial) Andrew Barth			Date of Receipt
	Mailing Address 2200 Chaucer Rd			02 05 2016
	City San Marino	State CA	Zip Code 91108	Transaction ID : IDTA13 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer	Occupation	1	Memo Item
	Capital Group	Investment	Management	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		5000.00	
s	UBTOTAL of Receipts This Page (optional)			0.00

TOTAL This Period (last page this line number only).....

14094.51

CHEDULE B (FEC Form 3X) Sometimes of the district of the sum of		PAGE 9 OF 15		
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)	
	Detailed Summary Page	\	22 23	24 25 26
		27	28a 28b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	The managed of any point	23	2	
Making Investments Majority Insure	ed PAC			
/ Waking investments wajority insure	,a i 7.0			
Full Name (Last, First, Middle Initial)				
A. American Express			Date of Disburs	
Mailing Address P.O.Box 981540				19 2016
			0,1	2010
•	State Zip Code		Transaction II) · FYPR165
2.1 466	TX 79998		Transaction ii	D. EXPB103
Purpose of Disbursement Shipping Costs		001	Amount of Each	n Disbursement this Period
Candidate Name			Amount of Each	i Dispuisement tills Fellod
		Category/ Type		43.67
Office Sought: House Disbursem	nent For:	7,5-	Memo Item	
Senate	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Diah	
B. Federal Express			Date of Disburs	
Mailing Address Payment Center				19 2016
maining / tautions of ayment oction			4.	.0
,	State Zip Code		Transaction I	D : EDTB2EXPB165
Memphis Purpose of Disbursement	TN 38101			
Shipping Costs		001	Amount of Each	n Disbursement this Period
Candidate Name			Amount of Each	1 Biobardement this 1 chea
		Category/ Type		43.67
Office Sought: House Disbursem	nent For:		× Memo Item	
	Primary General		_	
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. Kate Walters			Date of Disburs	sement
Nate Walters				D / Y Y Y Y
Mailing Address 2727 Revere Street, Unit 3050				01 2016
,	State Zip Code		Transaction II	D : EXPB168
Houston Purpose of Disbursement	TX 77089			
Reimbursement for Travel Costs		002	Amount of Fact	n Disbursement this Period
Candidate Name		Category/	A THOUSE OF LACE	. Diobarochient tills i enou
		Type		252.19
	nent For: 2016		Memo Item	
	Primary General			
	Other (specify) ▼			
State: District:				
CURTOTAL of Diphyroamonto This Daws (autisms)				295.86
SUBTOTAL of Disbursements This Page (optional)		·····		200.00
TOTAL This Period (last nage this line number only)				

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Making Investments Majority Insure	e and address of any political		
Full Name (Last, First, Middle Initial) A. American Express Mailing Address P.O.Box 981540			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sign Sign Sign Sign Sign Sign Sign Sign	tate Zip Code TX 79998		Transaction ID : EXPB173
Purpose of Disbursement Shipping Costs Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period
	ent For: Primary General Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial) B. Federal Express Mailing Address Payment Center			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City S	tate Zip Code TN 38101		Transaction ID : EDTB3EXPB173
Candidate Name Office Sought: House Disbursem Senate F		001 Category/ Type	Amount of Each Disbursement this Period 21.52 X Memo Item
State: District: Full Name (Last, First, Middle Initial) C.			Date of Disbursement
Mailing Address City S:	tate Zip Code		
Purpose of Disbursement Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	ent For: Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			21.52 317.38

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar	nents may not be sold or us ne and address of any politic	ed by any personal committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Making Investments Majority Insure	ed PAC		
Full Name (Last, First, Middle Initial)			
A. Justin Fareed for Congress			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 5068			01 29 2016
Santa Barbara	State Zip Code CA 93150		Transaction ID : EXPB167
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Justin Fareed		Category/ Type	2700.00
	nent For: 2016 Primary General Other (specify)	Турс	Memo Item
Full Name (Last, First, Middle Initial) B. Doug LaMalfa Committee Mailing Address 2150 River Plaza Dr., Suite 150			Date of Disbursement O2 19 2016
	State Zip Code		
Sacramento Purpose of Disbursement	CA 95833		Transaction ID : EXPB170
Contribution		011	Amount of Each Disbursement this Period
Candidate Name Doug LaMalfa		Category/ Type	2000.00
Office Sought: House Disburser	nent For: 2016 Primary General Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial) C. Volunteers for Shimkus			Date of Disbursement
Mailing Address PO Box 661	Mailing Address PO Box 661		
City Collinsville	State Zip Code IL 62234		Transaction ID : EXPB171
Purpose of Disbursement Contribution Candidate Name John Shimkus		011 Category/	Amount of Each Disbursement this Period 2500.00
	ment For: 2016 Primary General Other (specify)	Туре	Memo Item
SUBTOTAL of Disbursements This Page (optional)		·····	7200.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule		
I LIVIIZED DISBURSEIVIEN I S	for each category of the Detailed Summary Page	ne ` ┌┌ _{21b} ´	22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) Making Investments Majority Insure	•		
Full Name (Last, First, Middle Initial)			
A. Comstock for Congress			Date of Disbursement
Mailing Address PO BOX 831			03 29 2016
City S Mclean	State Zip Code VA 22101		Transaction ID : EXPB179
Purpose of Disbursement	22101		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name Barbara Comstock		Category/ Type	1500.00
Office Sought: House Disbursen	nent For: 2016 Primary Genera Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) B. Darlene Miller for Congress			Date of Disbursement
			M M / D D / Y Y Y Y Y
Mailing Address PO Box 13			03 29 2016
,	State Zip Code MN 55352		Transaction ID : EXPB182
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Darlene Miller Office Sought: ✓ House Disbursen	nent For: 2016	Туре	
Senate	Primary General Other (specify) ▼	al	Memo Item
Full Name (Last, First, Middle Initial) C. McSally for Congress			Date of Disbursement
Mailing Address 412 S Capitol Street, SE Suite B			03 29 2016
Washington	State Zip Code DC 20003		Transaction ID: EXPB177
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Martha McSally		Category/ Type	5000.00
•	nent For: 2016		Memo Item
Senate	Primary	ai 	

TEMIZED DISBURSEMENTS	Llos congreto cohodulo(o)	FOR LINE NUMBER: PAGE (check only one) 21b	13 OF 15 25 26 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Making Investments Majority Insure	e and address of any political of	by any person for the purpose of soliciting c	contributions
Full Name (Last, First, Middle Initial) A. Mike Coffman for Congress		Date of Disbursement	
Mailing Address 7720 E Belleview Ave, Ste B-325		2016	
,	tate Zip Code CO 80111	Transaction ID : EXPB181	A Main Don't I
Candidate Name Mike Coffman Office Sought: House Disbursem	nent For: 2016 Primary General	Amount of Each Disbursement ategory/ Type Memo Item	1000.00
State: CO District: 06 Full Name (Last, First, Middle Initial) Paul Cook for Congress	Other (specify) ▼	Date of Disbursement	
Mailing Address PO Box 365			2016
,	tate Zip Code CA 92286	Transaction ID : EXPB178 O11 Amount of Each Disbursement	at this Pariod
Candidate Name	Ca	ategory/	2500.00
Candidate Name Paul Cook Office Sought: House Senate Disbursem	cent For: 2016 Primary General Other (specify)		
Candidate Name Paul Cook Office Sought: House Disbursem Senate President	ent For: 2016 Primary General	Ategory/ Type Memo Item Date of Disbursement	
Candidate Name Paul Cook Office Sought: State: CA District: 08 Full Name (Last, First, Middle Initial) Steve Knight for Congress Mailing Address PO BOX 984	nent For: 2016 Primary ☐ General Other (specify) ▼	Date of Disbursement 03 / 29 / 2	2500.00
Candidate Name Paul Cook Office Sought: House Senate President State: CA District: 08 Full Name (Last, First, Middle Initial) C- Steve Knight for Congress Mailing Address PO BOX 984 City S Willows Purpose of Disbursement Contribution	ent For: 2016 Primary General	Date of Disbursement	2500.00 Y Y Y 2016
Candidate Name Paul Cook Office Sought: Senate President State: CA District: 08 Full Name (Last, First, Middle Initial) Steve Knight for Congress Mailing Address PO BOX 984 City Willows Purpose of Disbursement Contribution Candidate Name Steve Knight Office Sought: House Senate President Disbursem Senate President	ent For: 2016 Primary General Other (specify) state Zip Code CA 95988	Date of Disbursement M M M / D D / Y	2500.00 Y Y Y 2016
Candidate Name Paul Cook Office Sought: Senate President State: CA District: 08 Full Name (Last, First, Middle Initial) Steve Knight for Congress Mailing Address PO BOX 984 City Willows Purpose of Disbursement Contribution Candidate Name Steve Knight Office Sought: House Senate Disbursement Senate	ent For: 2016 Primary General Other (specify) State Zip Code CA 95988 Calculate CA 95988 Calculate CA General Other (specify) General Other (specify)	Date of Disbursement Date of Disbursement M M J D D / Y 2 Transaction ID : EXPB180 Amount of Each Disbursement ategory/ Type Memo Item	2500.00 2016 nt this Period

to reach category of the botaled Summary Page	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMINTTEE (in Full) Making Investments Majority Insured PAC Full Name (Last, First, Middle Initial) Brian Fitzpatrick for Congress Mailing Address PO Box 939 City State Zip Code Langhorne PA 19047 Purpose of Disbursement Contribution Candidate Name Category! Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category! Memo Item Disbursement This Period Category! Memo Item Disbursement Category! Memo Item Disbursement Category! Memo Item Date of Disbursement this Period Category! Memo Item Date of Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Date of Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Memo Item 1000.00 Date of Disbursement this Period Category! Memo Item Amount of Each Disbursement this Period Category! Memo Item Memo Item 1000.00 Date of Disbursement this Period Category! Memo Item Memo Item Amount of Each Disbursement this Period Category! Memo Item Memo Item	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 🗙 23 🔲 24 🔲 25 🖂 26
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SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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X	10

OF

15

NAME OF COMMITTEE (In Full) Making Investments Majority Insured PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Financial Analyst Campaign Compliance Group, Inc. Mailing Address 9070 Irvine Center Drive, #150 City State Zip Code Irvine 92618 Transaction ID: PAYD166 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2200.00 0.00 2200.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 2200.00 1) SUBTOTALS This Period This Page (optional)..... 2200.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 2200.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)